

Application Data Sheet

Application Information

Application Number::

Filing Date::

Application Type::

US National Phase

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

Title::

**MICROMACHINED GYROSCOPIC SENSOR
WITH DETECTION IN THE PLANE OF THE
MACHINED WAFER**

Attorney Docket Number::

4590-390

Request for Early Publication::

Request for Non-Publication::

Suggested Drawing Figure::

Total Drawing Sheets:: **3**

Applicant Information

Applicant Authority Type:: **Inventor**

Primary Citizenship Country:: **France**

Status::

Given Name:: **Liviu**

Middle Name::

Family Name:: **NICU**

Name Suffix::

City of Residence:: **La Roche De Glun**

State or Province of Residence::

Country of Residence:: **France**

Street of Mailing Address:: **15, Lotissement de la Saune**

City of Mailing Address:: **La Roche De Glun**

Postal or Zip Code:: **26600**

Applicant Authority Type:: **Inventor**
Primary Citizenship Country:: **France**
Status::
Given Name:: **Claude**
Middle Name::
Family Name:: **ROUGEOT**
Name Suffix::
City of Residence:: **Lyon**
State or Province of Residence::
Country of Residence:: **France**
Street of Mailing Address:: **6, Cours Gambetta**
City of Mailing Address:: **Lyon**
Postal or Zip Code:: **69007**

Applicant Authority Type:: **Inventor**
Primary Citizenship Country:: **France**
Status::
Given Name:: **Jérôme**
Middle Name::
Family Name:: **INGLESE**
Name Suffix::
City of Residence:: **Guilherand Granges**
State or Province of Residence::
Country of Residence:: **France**
Street of Mailing Address:: **190, Allée du Grand châtelet**
City of Mailing Address:: **Guilherand Granges**
Postal or Zip Code:: **07500**

Applicant Authority Type:: **Inventor**
Primary Citizenship Country:: **France**
Status::
Given Name:: **Bertrand**
Middle Name::
Family Name:: **LEVERRIER**
Name Suffix::
City of Residence:: **Montelier**
State or Province of Residence::
Country of Residence:: **France**
Street of Mailing Address:: **15, rue Chantebise**
City of Mailing Address:: **Montelier**
Postal or Zip Code:: **26120**

Correspondence Information

Correspondence Customer No:: **33308**
Phone Number:: **(703) 684-1111**
Fax Number:: **(703) 518-5499**
E-Mail Address::

Representative Information

Representative Customer Number::
Representative Designation:: Registration Number:: Representative Name::
Primary or Associate

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FR	02/13835	November 5, 2002	Yes
	PCT/EP2003/050785	November 3, 2003	Yes

Assignee Information

Assignee Name:: **THALES**
Street of Mailing Address:: **45, rue de Villiers**
City of Mailing Address:: **Neuilly Sur Seine**
State of Mailing Address::
Country of Mailing Address:: **France**
Postal or Zip Code:: **92200**